## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M04000002332

Address:

City-St-Zip:

60 AUBERGE ROAD

RUHERFORD, CA 94573

Entity Name: KATHRYN HALL VINEYARDS, LLC

FILED Apr 24, 2006 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:	
60 AUBER RUHERFO	GE ROAD ORD, CA 9457:	3		
Current Mailing Address:			New Mailing Address:	
	HELENA HIG LENA, CA 945	HWAY SOUTH 174 US		
FEI Number:	03-0524822	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
1201 HAYS	ATION SERVIC S STREET SSEE, FL 3230			
	named entity s e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
SIGNATUR	RE:			
	Electron	ic Signature of Registered Ag	gent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	P () HALL, KATHRYI 60 AUBERGE R RUTHERFORD,	ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	BRAUN, DONAL	D PKWY, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	LEVEY, LARRY	PKWY, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	JAYNES, MICH	PKWY, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	LACOURSE, MA	PKWY, STE. 100	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	VP () REYNOLDS, MI	Delete KE	Title: Name:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: MIKE REYNOLDS VP 04/24/2006